



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

Date: 3/25/15

Name of Provider Maranda Harvey	County Polk	
Care Address 1422 Milton Ave	City Des Moines	Zip Code 50316
Mailing Address —	City —	Zip Code —
Phone —	Email —	

Date of Complaint: 1/16/15

Date of visit: 3/25/15

<input type="checkbox"/> Scheduled	<input checked="" type="checkbox"/> Unannounced	<input type="checkbox"/> N/A
<input type="checkbox"/> Non-Compliance with Regulations Founded	<input type="checkbox"/> Compliance with Regulations Found	
<input type="checkbox"/> N/A		

RECOMMENDATION FOR REGISTRATION:

<input checked="" type="checkbox"/> No CHANGES to registration status recommended
<input type="checkbox"/> REVOCATION of Registration

CATEGORY OF CARE:

<input type="checkbox"/> Category A
<input checked="" type="checkbox"/> Category B
<input type="checkbox"/> Category C (with no co-provider)
<input type="checkbox"/> Category C (with co-provider)

Summary of Complaint:

Department received a complaint that a child incurred an injury to his foot while in the care of provider Maranda Harvey.

Rule Basis and Findings of Complaints:

110.5(6)a "Corporal punishment including spanking, shaking, and slapping is not used..."

Unannounced spot check conducted on 3/25/15. I was able to visit with Maranda about the child and the incident in question. We reviewed her approach to discipline. It was

determined the child in question was having a temper tantrum and was kicking wildly at the wall when the injury occurred. There is every appearance that the injury is accidental and was not inflicted by Maranda.

Resolution and Action Required:

I find no indication of non-compliance with disciplinary practices at Maranda's home.

A full spot check was conducted and some items not related to this complaint were discovered to be out of compliance as listed below. If provider responds to this checklist, no re-check will be conducted. Ongoing compliance will be monitored through future spot checks.

This letter is in regards to the 3/24/15 complaint check of your Category B, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.5(1) Conditions in the home are safe, sanitary, and free of hazards. (You need to repair or replace the damaged child gate between the living room and hallway.)

☐ 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits. (You need to post a second copy of your emergency/disaster plan next to your back door.)

☐ 110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and www.iowasmokefreeair.gov. (You need to re-post both no-smoking signs by the front and back door.)

☐ 110.5(1)q All dogs and cats have annual examinations. Records of the exams are on file and must verify that routine immunizations are current and animal is free of endo and ecto parasites. (You need to obtain a current vet check statement for your cat to be kept on file. These need to be renewed every year.)

110.5(2) A provider file is maintained and contains:

☐ 110.5(2)d An individual file is maintained for each substitute and contains: (You need to establish a file for substitute Cindy which includes a current health statement, current verification of mandatory reporter training, and current verification of CPR and First Aid.)

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations on or before** 5/13/15.

☒ Based on the items out of compliance listed above, a re-check or follow-up visit to your home is not necessary. However, it is essential you come into complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.

Please sign and date below, and return this form in the provided envelope by: 5/13/15.

X _____
Signature Date

Please call me if you have any further questions.

Sincerely,



Earl Crow
Child Development Home Compliance Checks
DHS, Story County
(515) 268-7106

C. Mark Chappelle
Social Work Supervisor
DHS, Dallas County
(515) 993-1705

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-800-722-7619.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to [http://dhs.iowa.gov/sites/default/files/CC Professional Development.pdf](http://dhs.iowa.gov/sites/default/files/CC%20Professional%20Development.pdf) and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).